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## POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

ed to respond to a conection of miormation diffess it displays a valid ONIB control number.					
Application Number	09/887,391				
Filing Date	June 22, 2001				
First Named Inventor	Fish III, Russell H.				
Title	Distributed Means of Organizing				
Art Unit	2157				
Examiner Name	Nano, Sargon N				
Attorney Docket Number	86724.0111				

	II previ	ous powers of attorney give	en in the ab	ove-ide	entified applic	ation.		
I hereby appoint:								
Practitioners associated with the Customer Number:								
OR								
Practitioner(s)	Practitioner(s) named below:							
	Name Registration Number						r	
George R. Sch	nultz			35,674				
William D. Har	William D. Harris, Jr.			19,243				
					<del>- "</del>			
							***	
as my/our attorney(s) Trademark Office con		<ul> <li>(s) to prosecute the application ide erewith.</li> </ul>	entified above	, and to t	transact all busin	ess in the l	United States Patent and	
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I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)								
		SIGNATURE of A	pplicant or A	ssignee	of Record			
Signature		U 1371 10	1 .			Date	3/28/67	
Name		H. Fish, III	,			Telephone	972-702-0817	
Title and Company	Title and Company President, Viametrix, Inc.							
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.								
*Total of forms are submitted.								

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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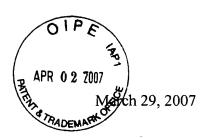
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## REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS

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	Application Number	09/887,391			
	Filing Date	June 22, 2001			
First Named Inventor		Fish III, Russell H.			
	Art Unit	2157			
Examiner Name		Nano, Sargon N			
	Attorney Docket Number	86724.0111			

I hereby revoke all previous powers of attorney given in the above-identified application.							
A Power of Attorney is submitted herewith.							
OR  I hereby appoint the practitioners associated with the Customer Number:							
Please change the correspondence address for the above-identified application to:  The address associated with Customer Number:  OR							
Firm or Individual Name	Schultz & Associates, P.C.	Schultz & Associates, P.C.					
Address	5400 LBJ Freeway Suite 1200						
City	Dallas	State	TX		Zip	75240	
Country USA							
Telephone	214-210-5940		Email				
I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.							
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)							
Signature Signature 3 / 2 8/6 7							
	1/4 77 3/10/3/						
Date	Russell H. Fish III, Fresident, Viametrix, IIIC.						
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one							
signature is required, see below							

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Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Re:

U.S. Application Nos. 09/887,391 & 10/178,075

Power of Attorney Forms

Our File: 86724.0111 & 86724.0112

Sir:

## Please find enclosed:

- 1. Two (2) Power of Attorney and Correspondence Address Indication Form;
- 2. Two (2) Revocation of Power of Attorney with New Power of Attorney and Change of Correspondence Address;
- 3. Transmittal Letter; and,
- 4. A postcard receipt.

Very truly yours

George "Russ" Schultz

GRS:kn Enclosure